

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	-1		
	2	Savings and temporary cash investments	104,539	107,122	107,122
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	567,788	553,390	754,335
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)			
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	672,326	660,512	861,457
	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ☒ and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted	672,326	660,512	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ☐ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	672,326	660,512	
	31	Total liabilities and net assets/fund balances (see instructions) .	672,326	660,512	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	672,326
2	Enter amount from Part I, line 27a	2	-11,146
3	Other increases not included in line 2 (itemize) ▶ _____	3	832
4	Add lines 1, 2, and 3	4	662,012
5	Decreases not included in line 2 (itemize) ▶ _____	5	1,500
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	660,512

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	23,683
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	-226

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	86,989	827,924	0 105069
2015	53,196	829,336	0 064143
2014	66,256	827,044	0 080112
2013	42,888	758,725	0 056526
2012	36,139	629,018	0 057453

2 Total of line 1, column (d)	2	0 363303
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 072661
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	855,140
5 Multiply line 4 by line 3	5	62,135
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	298
7 Add lines 5 and 6	7	62,433
8 Enter qualifying distributions from Part XII, line 4	8	88,560

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	298
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	298
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	298
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	298
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MA _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> 	10	Yes

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► DAVID J FELDMAN SYDNEY E FELDM Telephone no ► (781) 329-0319			

Located at **►** 47 VILLAGE AVENUE UNIT 207 DEDHAM MA ZIP+4 **►** 02026

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ☐ and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? ☐ Organizations relying on a current notice regarding disaster assistance check here. ► ☐	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? ☐	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☒ No If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). ☐	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). ☐	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No Organizations relying on a current notice regarding disaster assistance check here. ☐ 	5b		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No <i>If "Yes" to 6b, file Form 8870</i>	6b		No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID J FELDMAN SYDNEY E FELDMAN 47 VILLAGE AVENUE UNIT 207 DEDHAM, MA 02026	TRUSTEES 1 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. **0**

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3. **0**

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	770,299
b	Average of monthly cash balances.	1b	97,863
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	868,162
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	868,162
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	13,022
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	855,140
6	Minimum investment return. Enter 5% of line 5.	6	42,757

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	42,757
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	298
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	298
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	42,459
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	42,459
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	42,459

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	88,560
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	88,560
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	298
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	88,262

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				42,459
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.	6,767			
b From 2013.	5,266			
c From 2014.	25,555			
d From 2015.	11,729			
e From 2016.	45,895			
f Total of lines 3a through e.	95,212			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 88,560				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				42,459
e Remaining amount distributed out of corpus	46,101			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	141,313			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	6,767			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	134,546			
10 Analysis of line 9				
a Excess from 2013.	5,266			
b Excess from 2014.	25,555			
c Excess from 2015.	11,729			
d Excess from 2016.	45,895			
e Excess from 2017.	46,101			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) DAVID J FELDMAN SYDNEY E FELDMAN	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed DAVID J FELDMAN SYDNEY E FELDMAN 47 VILLAGE AVENUE UNIT 207 DEDHAM, MA 02026 (781) 329-0319	
b The form in which applications should be submitted and information and materials they should include NO SPECIFIC FORMS OR ENCLOSURES REQUIRED	
c Any submission deadlines NONE	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NONE	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	88,560
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments. . . .					
3	Interest on savings and temporary cash investments			14	7	
4	Dividends and interest from securities. . . .			14	17,618	
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory					23,683
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e). . .		0		17,625	23,683
13	Total. Add line 12, columns (b), (d), and (e).			13		41,308

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	***** 2018-05-10 Date	***** Title	May the IRS discuss this return with the preparer shown below (see instr.)? ☒ Yes ☐ No
	Signature of officer or trustee			

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	CAROLYN BEATTY		2018-05-10		P01209112
	Firm's name ▶ HOWLAND CAPITAL MANAGEMENT LLC				Firm's EIN ▶ 46-1580977
	Firm's address ▶ 75 FEDERAL ST BOSTON, MA 02110				Phone no (617) 357-9110

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
CARMAX INC		2012-05-17	2017-03-10
CLEAN HARBORS INC DTD 07/30/2012 5 25% 0		2013-05-24	2017-08-01
CULLEN FROST BANKERS INC		2012-05-17	2017-09-14
HARBOR FD INTL FD # 2011		2012-05-17	2017-12-15
HARBOR FD INTL FD # 2011		2016-11-08	2017-12-15
PIMCO ETF TR LOW DURTN AC ETF		2016-09-26	2017-03-01
PIMCO ETF TR LOW DURTN AC ETF		2016-09-26	2017-09-14
SCHLUMBERGER LTD		2012-05-17	2017-10-24
WALGREENS BOOTS ALLIANCE INC COM		2012-07-25	2017-10-20
CORE LABORATORIES NV SHS		2014-05-13	2017-10-25

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
8,008		3,535	4,473
5,066		5,134	-68
15,871		10,204	5,667
25,959		19,859	6,100
17,624		14,998	2,626
19,563		19,718	-155
19,647		19,718	-71
11,214		11,710	-496
20,291		10,409	9,882
4,703		8,157	-3,454

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			4,473
			-68
			5,667
			6,100
			2,626
			-155
			-71
			-496
			9,882
			-3,454

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
CORE LABORATORIES NV SHS		2012-06-28	2017-10-25

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
3,763		4,584	-821

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-821

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
A BABY PLACE81 WILLOW AVE HYANNIS, MA 02601	NONE	PC	GENERAL	150
ALEX'S LEMONADE STAND FOUNDATION 111 PRESIDENTIAL BLVD SUITE 203 BALA CYNWYD, PA 19004	NONE	PC	GENERAL	100
ALZHEIMERS ASSOCIATION 480 PLEASANT ST WATERTOWN, MA 02472	NONE	PC	GENERAL	100
AMERICAN CANCER SOCIETY 250 WILLIAMS ST ATLANTA, GA 30303	NONE	PC	GENERAL	100
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS, TX 75231	NONE	PC	GENERAL	200
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN RED CROSS286 SOUTH ST HYANNIS, MA 02601	NONE	PC	GENERAL	100
AMERICAN SOCIETY FOR YAD VASHEM 500 FIFTH AVENUE 42ND FLOOR NEW YORK, NY 10110	NONE	PC	GENERAL	100
AMERICAN SOCIETY FOR YAD VASHEM 500 FIFTH AVENUE 42ND FLOOR NEW YORK, NY 10110	NONE	PC	GENERAL	200
ARAVA INSTITUTE1320 CENTER ST NEWTON, MA 02459	NONE	PC	GENERAL	200
BETH ISRAEL DEACONNESS MEDICAL CENTER 330 BROOKLINE AVE BOSTON, MA 02115	NONE	PC	GENERAL	100
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIKES NOT BOMBS INC284 AMORY ST JAMAICA PLAIN, MA 02131	NONE	PC	GENERAL	100
BNAI BRITH INTERNATIONAL 1120 20TH ST SUITE 300N WASHINGTON, DC 20036	NONE	PC	GENERAL	85
BOSTON MEDICAL CENTER 1 BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118	NONE	PC	GENERAL	100
BOSTON MEDICAL CENTER 1 BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118	NONE	PC	GENERAL	300
BOSTON MEDICAL CENTER 1 BOSTON MEDICAL CENTER PLACE BOSTON, MA 02118	NONE	PC	GENERAL	5,000
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BOSTON UNIVERSITY 881 COMMONWEALTH AVENUE BOSTON, MA 02215	NONE	PC	GENERAL	200
CAMBRIDGE SCHOOL OF WESTON 45 GEORGIAN R WESTON, MA 02493	NONE	PC	GENERAL	200
CAMBRIDGE SCHOOL OF WESTON 45 GEORGIAN R WESTON, MA 02493	NONE	PC	GENERAL	500
CASA ORANGE COUNTY 100 WEST HARRISON ST SEATTLE, WA 98119	NONE	PC	GENERAL	100
CATHOLIC FOUNDATION OF RI 1 CATHEDRAL SQUARE PROVIDENCE, RI 02903	NONE	PC	GENERAL	100
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER SCHOOL PTO ABINGTON 65 THAXTER AVE ABINGTON, MA 02351	NONE	PC	GENERAL	50
CHILDREN'S HOSPITAL BOSTON 300 LONGWOOD AVE BOSTON, MA 02115	NONE	PC	GENERAL	150
COMBINED JEWISH PHILANTHROPOIES 126 HIGH ST BOSTON, MA 02110	NONE	PC	GENERAL	1,000
DANA FARBER CANCER INSTITUTE 450 BROOKLINE AVE BOSTON, MA 02215	NONE	PC	GENERAL	100
DEDHAM SQUARE CIRCLEPO BOX 593 DEDHAM, MA 02027	NONE	PC	GENERAL	100
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DOMESTIC VIOLENCE296 NEWTON ST WALTHAM, MA 02453	NONE	PC	GENERAL	100
DRESS FOR SUCCESS BOSTON 989 COMMONWEALTH AVE BOSTON, MA 02215	NONE	PC	GENERAL	200
DRESS FOR SUCCESS BOSTON 989 COMMONWEALTH AVE BOSTON, MA 02215	NONE	PC	GENERAL	200
EAGLE CREEK FLORIDA CHARITIES 18 CYPRESS VIEW DRIVE NAPLES, FL 34113	NONE	PC	GENERAL	150
EASTERN UNIVERSITY1300 EAGLE RD ST DAVIDS, PA 19087	NONE	PC	GENERAL	6,000
Total ► 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EASTERN UNIVERSITY1300 EAGLE RD ST DAVIDS, PA 19087	NONE	PC	GENERAL	30,000
FARR ACADEMY71 PEARL ST CAMBRIDGE, MA 02139	NONE	PC	GENERAL	75
FARR ACADEMY71 PEARL ST CAMBRIDGE, MA 02139	NONE	PC	GENERAL	1,500
GATEWAYS ACCESS TO JEWISH EDUCATION 333 NAHANTON ST NEWTON, MA 02459	NONE	PC	GENERAL	200
HEIFER INTERNATIONAL1 WORLD AVE LITTLE ROCK, AR 07202	NONE	PC	GENERAL	100
Total 				88,560
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWISH FAMILY SERVICES OF CENTRAL NEW JERSEY 665 WESTFIELD AVE ELIZABETH, NJ 07207	NONE	PC	GENERAL	50
JIMMY FUND10 BROOKLINE PLACE BROOKLINE, MA 02445	NONE	PC	GENERAL	100
JIMMY FUND10 BROOKLINE PLACE BROOKLINE, MA 02445	NONE	PC	GENERAL	100
JIMMY FUND10 BROOKLINE PLACE BROOKLINE, MA 02445	NONE	PC	GENERAL	500
JOSLIN DIABETES CENTER 1 JOSLIN PLACE BOSTON, MA 02215	NONE	PC	GENERAL	100
Total 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOSLIN DIABETES CENTER 1 JOSLIN PLACE BOSTON, MA 02215	NONE	PC	GENERAL	200
MALENOMA FOUNDATION OF NEW ENGLAND 490 VIRGINIA RD CONCORD, MA 01742	NONE	PC	GENERAL	100
MASS ASSOCIATION FOR THE BLIND 600 WASHINGTON ST BOSTON, MA 02111	NONE	PC	GENERAL	1,875
MASS ASSOCIATION FOR THE BLIND 600 WASHINGTON ST BOSTON, MA 02111	NONE	PC	GENERAL	1,875
MASS ASSOCIATION FOR THE BLIND 600 WASHINGTON ST BOSTON, MA 02111	NONE	PC	GENERAL	1,875
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MASS ASSOCIATION FOR THE BLIND 600 WASHINGTON ST BOSTON, MA 02111	NONE	PC	GENERAL	1,875
MASS ASSOCIATION FOR THE BLIND 600 WASHINGTON ST BOSTON, MA 02111	NONE	PC	GENERAL	1,875
MASSACHUSETTS PROSTATE CANCER COALITION 200 LINCOLN ST 201 BOSTON, MA 02111	NONE	PC	GENERAL	100
MASSACHUSETTS PROSTATE CANCER COALITION 200 LINCOLN ST 201 BOSTON, MA 02111	NONE	PC	GENERAL	100
MILLION DOLLAR ROUND TABLE FOUNDATION 325 WEST TOUHY AVENUE PARK RIDGE, IL 60068	NONE	PC	GENERAL	500
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NATIONAL BRAILLE PRESS 88 ST STEPHEN ST BOSTON, MA 02115	NONE	PC	GENERAL	500
NATIONAL BRAILLE PRESS 88 ST STEPHEN ST BOSTON, MA 02115	NONE	PC	GENERAL	5,000
NEEDHAM EXCHANGE CLUB 175 GREENDALE AVE NEEDHAM, MA 02494	NONE	PC	GENERAL	200
NEEDHAM GOLF CLUB CHARITIES 49 GREEN STREET NEEDHAM, MA 02492	NONE	PC	GENERAL	150
NEUROFIBROSIS FOUNDATION 9 BEDFORD ST 3 BURLINGTON, MA 01803	NONE	PC	GENERAL	200
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEWTON WELLESLEY HOSPITAL 2014 WASHINGTON ST NEWTON, MA 02462	NONE	PC	GENERAL	1,000
PAN MASS CHALLENGE 77 FOURTH AVENUE NEEDHAM, MA 02494	NONE	PC	GENERAL	125
PAN MASS CHALLENGE 77 FOURTH AVENUE NEEDHAM, MA 02494	NONE	PC	GENERAL	200
PAN MASS CHALLENGE 77 FOURTH AVENUE NEEDHAM, MA 02494	NONE	PC	GENERAL	200
PAN MASS CHALLENGE 77 FOURTH AVENUE NEEDHAM, MA 02494	NONE	PC	GENERAL	500
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PAN MASS CHALLENGE 77 FOURTH AVENUE NEEDHAM, MA 02494	NONE	PC	GENERAL	700
PRESENTATION SCHOOL FOUNDATION 641 WASHINGTON ST BRIGHTON, MA 02136	NONE	PC	GENERAL	600
REACH1028 FARMINGTON AVE FARMINGTON, CT 06033	NONE	PC	GENERAL	100
REACH1030 FARMINGTON AVE FARMINGTON, CT 06035	NONE	PC	GENERAL	100
REACH1029 FARMINGTON AVE FARMINGTON, CT 06034	NONE	PC	GENERAL	250
Total 				88,560
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
REACH1030 FARMINGTON AVE FARMINGTON, CT 06035	NONE	PC	GENERAL	1,000
RIVERS SCHOOL333 WINTER ST WESTON, MA 02493	NONE	PC	GENERAL	200
RIVERS SCHOOL333 WINTER ST WESTON, MA 02493	NONE	PC	GENERAL	1,000
ROSIE'S PLACE889 HARRISON AVE BOSTON, MA 02118	NONE	PC	GENERAL	100
SALVATION ARMY 1501 WASHINGTON ST BOSTON, MA 02111	NONE	PC	GENERAL	100
Total 				88,560
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SILENT SPRING INSTITUTE 320 NEVADA ST NEWTON, MA 02460	NONE	PC	GENERAL	150
ST JUDE'S CHILDREN'S HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	NONE	PC	GENERAL	500
ST MARY'S HEALTH CARE OF WORCESTER 39 QUEEN ST WORCESTER, MA 01610	NONE	PC	GENERAL	100
ST MARY'S TUITION ANGEL FUND 40 SPRING MOUNT ROAD SCHWARTVILLE, PA 19473	NONE	PC	GENERAL	200
ST THERESA OF AVILA PARISH 2078 CENTRE ST WEST ROXBURY, MA 02132	NONE	PC	GENERAL	50
Total 				88,560
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEMPLE BETH SHALOM 673 HIGHLAND AVE NEEDHAM, MA 02497	NONE	PC	GENERAL	100
TEMPLE BETH SHALOM 675 HIGHLAND AVE NEEDHAM, MA 02499	NONE	PC	GENERAL	100
TEMPLE BETH SHALOM 680 HIGHLAND AVE NEEDHAM, MA 02504	NONE	PC	GENERAL	100
TEMPLE BETH SHALOM 678 HIGHLAND AVE NEEDHAM, MA 02502	NONE	PC	GENERAL	100
TEMPLE BETH SHALOM 672 HIGHLAND AVE NEEDHAM, MA 02496	NONE	PC	GENERAL	172
Total ► 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEMPLE BETH SHALOM 681 HIGHLAND AVE NEEDHAM, MA 02505	NONE	PC	GENERAL	200
TEMPLE BETH SHALOM 681 HIGHLAND AVE NEEDHAM, MA 02505	NONE	PC	GENERAL	350
TEMPLE BETH SHALOM 679 HIGHLAND AVE NEEDHAM, MA 02503	NONE	PC	GENERAL	2,100
TEMPLE BETH SHALOM 674 HIGHLAND AVE NEEDHAM, MA 02498	NONE	PC	GENERAL	2,730
TEMPLE SHIR TIKVA 141 BOSTON POST RD WAYLAND, MA 01778	NONE	PC	GENERAL	2,948
Total 				88,560
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE BEN GREENBERG CHILDREN'S FOUNDATION 384 MANNING STREET NEEDHAM, MA 02492	NONE	PC	GENERAL	500
THE OUTREACH PROGRAM 393 MANTON AVE PROVIDENCE, RI 02909	NONE	PC	GENERAL	1,000
TUFTS MEDICAL CENTER 800 WASHINGTON ST BOSTON, MA 02118	NONE	PC	GENERAL	100
TUFTS MEDICAL CENTER 800 WASHINGTON ST BOSTON, MA 02118	NONE	PC	GENERAL	1,000
TUFTS MEDICAL CENTER 800 WASHINGTON ST BOSTON, MA 02118	NONE	PC	GENERAL	1,000
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TUFTS MEDICAL CENTER 800 WASHINGTON ST BOSTON, MA 02118	NONE	PC	GENERAL	2,500
US HOLOCAUST MUSUEM 101 RAOUL WALLENBERG PL SW WASHINGTON, DC 20025	NONE	PC	GENERAL	100
UNICEF USA125 MAIDEN LANE NEW YORK, NY 10038	NONE	PC	GENERAL	200
UNIQUE RARE CHROMOSOME DISORDER SUPPORT GROUP PO BOX 724 BOCA RATON, FL 33429	NONE	PC	GENERAL	200
WALK FOR HEARING145 BORDEN ST BOSTON, MA 02128	NONE	PC	GENERAL	200
Total ▶ 3a				88,560

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WATERBURY FOUNDATION43 FIELD ST WATERBURY, CT 06702	NONE	PC	GENERAL	100
WAYLAND PUBLIC SCHOOLSPO BOX 97 WAYLAND, MA 01778	NONE	PC	GENERAL	100
WAYLAND PUBLIC SCHOOLSPO BOX 97 WAYLAND, MA 01778	NONE	PC	GENERAL	250
Total ▶ 3a				88,560

TY 2017 Accounting Fees Schedule

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Accounting Fees Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION	2,800	2,800	0	0

TY 2017 Investments Corporate Stock Schedule

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Name of Stock	End of Year Book Value	End of Year Fair Market Value
NATCO ACCOUNT	553,390	754,335

TY 2017 Other Decreases Schedule

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Description	Amount
PRIOR PERIOD ADJUSMENT	1,500

TY 2017 Other Expenses Schedule

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FORM PC FILING FEE	35	35	0	0
DEDHAM BANK FEE	138	138	0	0

TY 2017 Other Increases Schedule

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Description	Amount
OTHER ADJUSTMENT	832

TY 2017 Other Professional Fees Schedule

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	8,542	8,542	0	0

**TY 2017 Substantial Contributors
Schedule**

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Name	Address
DAVID SYDNEY FELDMAN	47 VILLAGE AVENUE 207 DEDHAM, MA 02026

TY 2017 Taxes Schedule

Name: DAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST

EIN: 22-2378773

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	228	0	0	0
PY FORM 990PF	151	0	0	0

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Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990			OMB No 1545-0047 2017
Name of the organization DAVID J FELDMAN AND SYDNEY E FELDMAN CHARITABLE TRUST				Employer identification number 22-2378773	

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization DAVID J FELDMAN AND SYDNEY E FELDMAN CHARITABLE TRUST	Employer identification number 22-2378773
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Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID & SYDNEY FELDMAN 47 VILLAGE AVENUE 207 DEDHAM, MA 02026	\$ 48,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

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Part II

[illegible]

Name of organizationDAVID J FELDMAN AND SYDNEY E FELDMAN
CHARITABLE TRUST**Employer identification number**

22-2378773

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	